

FAMILY PHYSICIAN

the family and community and an advisor, confidant, friend and advocate after the manner assumed by many astute physicians of the past but seldom specifically prepared for in their training. The provision of a constantly available resource in time of emergency, a guide to the complexities of the health care system and an advisor on a vast array of complicated decisions of life are functions which have always been a part of family practice. In the past, however, there has been little directed training for these. Underlying these and all the other functions of a family physician must be a profound intuitive and instructed understanding of

human life and its interrelations. In the past this material has seemed too complex or too simple or too intimate to be taught. We have now progressed to a stage where these things can be brought into consciousness and identified as learning objectives.

REFERENCES

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Length of Medicare Hospital Stays by Region

MEDICARE PATIENTS in the West had significantly shorter hospital stays in 1970 than those in the Northeast for treatment of the same medical conditions, a Social Security Administration study has found.

The report, titled "*Medicare 1970: Length of Stay by Diagnosis*," was issued by Social Security's Office of Research and Statistics. It found differences in hospital stays of up to 50 percent between the two regions.

The average length of stay nationally was shown at 12.8 days. In the Western states, the average stay was 10.1 days; in the South, 11 days; in the North Central states, 13.1 days; and in the Northeast, 15 days.

The study was based on a sample of 5.5 million discharges of Medicare patients from short-stay hospitals in 1970. The differences in length of stay between regions carried through all age groups over 65 and in cases with surgery, as well as those without surgery.

Women diagnosed in the West as having breast cancer had an average hospital stay of 11.1 days. In Northeastern hospitals, the average stay for treatment of breast cancer was 16.4 days.

Other examples of the differences in hospital stays between the two regions were:

- Arteriosclerotic heart disease: West, 9.7 days; Northeast, 15 days.
- Acute coronary occlusion: West, 13.9 days; Northeast, 18.3 days.
- Fractured femur with two or more diagnoses: West, 22 days; Northeast 29.5 days.
- Malignant neoplasms of the cervix: West, 7.5 days; Northeast, 16.5 days.

There were no major differences in length of hospital stays between the Southern and North Central states, the report showed. For example, treatment of breast cancer produced an average stay of 14.5 days in the South and 15.7 days in the North Central states. Treatment for arteriosclerotic heart disease required 11.5 days of care in the South and 13.3 days in the North Central states.

Single copies of *Medicare 1970: Length of Stay by Diagnosis* [DHEW Publication No. (SSA) 74-11704] may be obtained free from the Publications Staff, Office of Research and Statistics, Social Security Administration, 1875 Connecticut Avenue, N.W., Washington D.C. 20009. The report may be obtained in quantities through the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. (Stock No. 1770-00236) at \$2.40 a copy.